

O I P E  
JAN 28 2005  
U.S. PATENT & TRADEMARK OFFICE  
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER509328401US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 28, 2005

Signature: Staci Harris  
(Staci Harris)

Docket No.: HO-P02149US0  
(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Martin Stjernstrom

Application No.: 09/830,795

Group Art Unit: 1743

Filed: October 29, 1999

Examiner: D. K. Handy

For: LIQUID MICROVOLUME HANDLING  
SYSTEM

### TRANSMITTAL LETTER

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

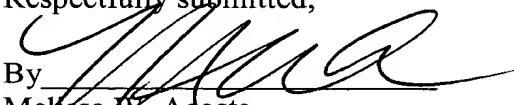
1. Amendment in Response to Non-Final Office Action (8 pages)
2. One Month Request for Extension of Time Under 37 CFR 1.136 (a) (2 pages)
3. Fee Transmittal (1 page)
4. Information Disclosure Statement (2 pages)
5. IDS Statement (Citation listing references) 2 pages)
6. Return postcard

Our checks in the amount of \$180.00 and \$120.00 covering the required fees are enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 06-2375, under Order No. 10102583.

Dated: January 28, 2005

Respectfully submitted,

By

  
Melissa W. Acosta

Registration No.: 45,872

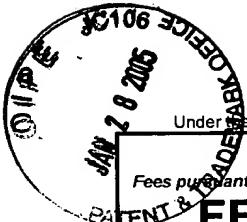
FULBRIGHT & JAWORSKI L.L.P.

1301 McKinney, Suite 5100

Houston, Texas 77010-3095

(713) 651-5151

Attorney for Applicant



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/830,795
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	October 29, 1999
<b>TOTAL AMOUNT OF PAYMENT</b> <b>(\$)</b> <b>300.00</b>		First Named Inventor	Martin Stjernstrom
		Examiner Name	D. K. Handy
		Art Unit	1743
		Attorney Docket No.	HO-P02149US0

**METHOD OF PAYMENT** (check all that apply)

<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account		Deposit Account Number: <u>06-2375</u>		Deposit Account Name: <u>Fulbright &amp; Jaworski L.L.P.</u>

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
- =	x	=		<u>Fee (\$)</u>
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee Paid (\$)</u>

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	<u>Fees Paid (\$)</u>

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

120.00

1806 Submission of Information Disclosure Statement

180.00

<b>SUBMITTED BY</b>		Registration No. (Attorney/Agent)	Telephone
Signature		45,872	(713) 651-5407
Name (Print/Type)	Date      January 28, 2005		

**Fee Transmittal**

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Application No. (if known): 09/830,795

Attorney Docket No.: HO-P02149US0

## Certificate of Express Mailing Under 37 CFR 1.10

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P.O. Box 1450  
Alexandria, VA 22313-1450

on January 28, 2005  
Date

Staci V. Harris  
Signature

Staci Harris  
Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

IDS (Citation) by Applicant (2 pages)  
Information Disclosure Statement  
Check in the amount of \$180.00